MONTANA DEPARTMENT OF LIVESTOCK APPLICATION FOR MONTANA LIVESTOCK DEALER LICENSE (Continued)

To The Department of Livestock Brands Enforcement Division Administrator:			
I hereby state that I am fully aware and I do will following person(s) while acting as an agent for name of the Entity to be licensed as listed on pa Administration (at the times required by Packers on page1, part 1) can be determined correctly.	me. I will inform the following ago ge 1, part 1. Furthermore, I will s & Stockyards) concerning the acti	ents listed below that they will co end all required information to the vities of all agents so that the bo	onduct all transactions under the ne Packers & Stockyards and amount for the entity (as listed
Livestock Dealer A	gents: A licensing fee is requi		
Name of Agent	Social Security Number	Mailing Addres	s & Phone Number
All information, concerning the agents	listed above, is required to pro	cess their license	
Name of Licensed Dealer (from page 1, part	1):		
Signed:	(Owner, Partr	ner, or Responsible Officer)	
Subscribed an	Subscribed and Sworn to before me this day of 20		
	Not	ary Public for the State of	

My Commission expires _____